

IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF PENNSYLVANIA

In Re: Michelle R Bowers : Bankruptcy No. 16-24005
:
Debtor :
Michelle R Bowers : Chapter 13
Movant :
: Related to Document No. 48
v. :
:
:
No Respondent :

AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s) or statement(s) are transmitted herewith:

☐ Voluntary Petition - *Specify reason for amendment:*

☐ Official Form 6 Schedules (Itemization of Changes Must Be Specified)

☐ Summary of Schedules

☐ Schedule A - Real Property

☐ Schedule B - Personal Property

☐ Schedule C - Property Claimed as Exempt

☒ Schedule D - Creditors holding Secured Claims

Check one:

☐ Creditor(s) added

☒ NO Creditor(s) added

☐ Creditor(s) deleted

☒ Schedule E - Creditors Holding Unsecured Priority Claims

Check one:

☐ Creditor(s) added

☒ NO Creditor(s) added

☐ Creditor(s) deleted

☐ Schedule F - Creditors Holding Unsecured Nonpriority Claims

Check one:

☐ Creditor(s) added

☐ NO Creditor(s) added

☐ Creditor(s) deleted

☐ Schedule G - Executory Contracts and Unexpired Leases

Check one:

☐ Creditor(s) added

☐ NO Creditor(s) added

☐ Creditor(s) deleted

☐ Schedule H - Codebtors

☐ Schedule I - Current Income of Individual Debtor(s)

☐ Schedule J - Current Expenditures of Individual Debtor(s)

☐ Statement of Financial Affairs

☐ Chapter 7 Individual Debtor's Statement of Intention

☐ Chapter 11 List of Equity Security Holders

☐ Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims

☐ Disclosure of Compensation of Attorney for Debtor

☐ Other: _____

NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES

Pursuant to Fed.R.Bankr.P. 1009(a) and Local Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment as follows:

(see attached list)

Date March 1, 2017

/s/ Joseph J. Nash

Attorney for Debtor(s) [or *pro se* Debtor(s)]

Joseph J. Nash

(Typed Name)

PO Box 673

SLIPPERY ROCK, PA 16057

(Address)

724-406-0616

(Phone No.)

Penn. #204583

List Bar I.D. and State of Admission

Note: An amended matrix of creditors added by the amendment must be submitted on disk with the amendment. Attorneys filing electronically on the Case Management/Electronic Case Filing System may add creditors to the case electronically.

PRA Receivables Management, LLC
PO Box 41021
Norfolk, VA 23541-1021

Pennsylvania Dept. of Revenue
Department 280946
P.O. Box 280946
ATTN: BANKRUPTCY DIVISION
Harrisburg, PA 17128-0946

Peoples TWP LLC
c/o S. James Wallace, P.C.
845 N. Lincoln Ave.
Pittsburgh, PA 15233-1828

Allegent Community Fcu
1001 Liberty Ave, Ste #100
Pittsburgh, PA 15222-3715

Allegent Community Federal Credit Union
2000 Corporate Drive, Suite 2500
Wexford, PA 15090-7611

Allegent Credit Union
1001 Liberty Ave.
Pittsburgh, PA 15222-3726

Ally Bank
PO Box 130424
Roseville MN 55113-0004

Ally Financial
Po Box 380901
Bloomington, MN 55438-0901

Bank Of America
Nc4-105-03-14
Po Box 26012
Greensboro, NC 27420-6012

Belden Jewelers/Sterling Jewelers, Inc
Attn: Bankruptcy
Po Box 1799
Akron, OH 44309-1799

Berkheimer Tax
PO Box 25153
Lehigh Valley, PA 18002-5153

Butler Memorial Hospital
1 Hospital Way
Butler, PA 16001-4697

Capl/polrs
Capital One Retail Services
Po Box 30285
Salt Lake City, UT 84130-0285

Capital One
Po Box 30285
Salt Lake City, UT 84130-0285

Capital One Retail Services
PO Box 71106
Charlotte, NC 28272-1106

Capital One, N.A.
c/o Becket and Lee LLP
PO Box 3001
Malvern PA 19355-0701

Cavalry SPV I, LLC
500 Summit Lake Drive, Ste 400
Valhalla, NY 10595-1340

Chase Card Services
Attn: Correspondence Dept
Po Box 15298
Wilmington, DE 19850-5298

Citibank / Sears
Citicorp Credit Services/Attn: Centraliz
Po Box 790040
Saint Louis, MO 63179-0040

Citibank/The Home Depot
Citicorp Cr Srvs/Centralized Bankruptcy
Po Box 790040
S Louis, MO 63179-0040

Deere & Company d/b/a John Deere Financial
PO Box 6600
Johnston IA 50131-6600

Dept Of Ed/Navient
Attn: Claims Dept
Po Box 9400
Wilkes Barr, PA 18773-9400

Discover Bank
Discover Products Inc
PO Box 3025
New Albany, OH 43054-3025

Discover Financial
Po Box 3025
New Albany, OH 43054-3025

Harley Davidson Credit
Dept. 15129
Palatine, IL 60055-0001

Harley-Davidson Credit Corp.
PO Box 9013
Addison, Texas 75001-9013

IRS
PO BOX 7346
Philadelphia, PA 19101-7346

JPMorgan Chase Bank, N.A.
National Bankruptcy Department
P.O. Box 29505 AZ1-1191
Phoenix, AZ 85038-9505

John Deere Financial
PO Box 6600
Johnston, IA 50131-6600

Kohls/Capital One
Po Box 3120
Milwaukee, WI 53201-3120

Navient Solutions, Inc. on behalf of
Department of Education Loan Services
PO BOX 9635
Wilkes-Barre, PA 18773-9635

Office of the United States Trustee
Liberty Center.
1001 Liberty Avenue, Suite 970
Pittsburgh, PA 15222-3721

Subaru Motors
PO Box 901037
Fort Worth, TX 76101-2037

Synch/levin Furniture
Po Box 965064
Orlando, FL 32896-5064

Synchrony Bank/Lowes
Po Box 965064
Orlando, FL 32896-5064

Synchrony Bank/Sams
Po Box 965060
Orlando, FL 32896-5060

Wells Fargo
PO Box 14411
Des Moines, IA 50306-3411

Wells Fargo Bank, N.A.
Default Document Processing
MAC # N9286-01Y
1000 Blue Gentian Road
Eagan MN 55121-7700

Ronda J. Winnecour
Suite 3250, USX Tower
600 Grant Street
Pittsburgh, PA 15219-2702

Fill in this information to identify your case:

Debtor 1 Michelle R Bowers
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number 16-24005
(if known)

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any	
2.1	<p><u>Allegent Credit Union</u> <small>Creditor's Name</small></p> <p><u>1001 Liberty Ave.</u> <u>Pittsburgh, PA 15222</u> <small>Number, Street, City, State & Zip Code</small></p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p>	<p>Describe the property that secures the claim: <u>214 Willow Run Rd. Butler, PA 16001 Butler County</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)</p>	\$5,474.40	\$147,509.00	\$0.00
<p>Date debt was incurred <u>3/2014</u> Last 4 digits of account number <u>9220</u></p>					

2.2	<p><u>Allegent Credit Union</u> <small>Creditor's Name</small></p> <p><u>1001 Liberty Ave.</u> <u>Pittsburgh, PA 15222</u> <small>Number, Street, City, State & Zip Code</small></p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p>	<p>Describe the property that secures the claim: <u>2014 Subaru WRX 62300 miles kbb.com used for valuation Location: 214 Willow Run Dr., Butler PA 16001</u></p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)</p>	\$22,824.00	\$11,000.00	\$11,824.00
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Debtor 1 Michelle R Bowers Case number (if know) 16-24005
 First Name Middle Name Last Name

Date debt was incurred 12/2014 Last 4 digits of account number 9220

2.3 <u>Ally Financial</u> Creditor's Name PO Box 9001951 Louisville, KY 40290 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 2016 Ram 2500 8000 miles In possession of husband (seperated) Shawn Bowers As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	<u>\$52,129.00</u> <u>\$7,200.00</u> <u>\$44,929.00</u>
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Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred 6/2016 Last 4 digits of account number 1183

2.4 <u>Capital One Retail Services</u> Creditor's Name PO Box 71106 Charlotte, NC 28272 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 20155 Polaris Razor 900 ebay.com used for valuation Location: 214 Willow Run Dr., Butler PA 16001 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	<u>\$11,742.57</u> <u>\$10,000.00</u> <u>\$1,742.57</u>
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Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred 1/2015 Last 4 digits of account number 5771

2.5 <u>Harley Davidson Credit</u> Creditor's Name Dept. 15129 Palatine, IL 60055 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 2013 Harley Davidson Streetglide 10400 miles As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	<u>\$9,425.20</u> <u>\$15,000.00</u> <u>\$0.00</u>
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Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred 5/2013 Last 4 digits of account number 7024

Debtor 1 Michelle R Bowers Case number (if know) 16-24005
 First Name Middle Name Last Name

2.6 <u>John Deere Financial</u> Creditor's Name PO Box 6600 Johnston, IA 50131-6600 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 2015 John Deere 1025 18000 Ebay used for valuation. As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	\$19,891.00 \$18,000.00 \$1,891.00
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Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred 10/2015 **Last 4 digits of account number** 6716

2.7 <u>JP Morgan Chase Bank</u> Creditor's Name PO Box 29505 AZ1-1191 Phoenix, AZ 85038-9505 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 2015 Subaru Motors Impreza 477000 miles kbb.com used for valuation Location: 214 Willow Run Dr., Butler PA 16001 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	\$23,671.23 \$13,383.00 \$10,288.23
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Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred 5/2015 **Last 4 digits of account number** 5906

2.8 <u>Wells Fargo</u> Creditor's Name PO Box 14411 Des Moines, IA 50306 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 214 Willow Run Rd. Butler, PA 16001 Butler County As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset)	\$129,409.59 \$147,509.00 \$0.00
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Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Date debt was incurred 6/2010 **Last 4 digits of account number** 1863

Debtor 1 Michelle R Bowers Case number (if know) 16-24005
First Name Middle Name Last Name

Add the dollar value of your entries in Column A on this page. Write that number here:

\$274,566.99

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$274,566.99

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐

Name, Number, Street, City, State & Zip Code
Weltman, Weinberg and Reis
436 7th Ave. Suite 2500
Pittsburgh, PA 15219

On which line in Part 1 did you enter the creditor? 2.1

Last 4 digits of account number _____

Fill in this information to identify your case:

Debtor 1 Michelle R Bowers
 First Name Middle Name Last Name

Debtor 2
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number 16-24005
 (if known)

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount	
2.1	Berkheimer Tax Priority Creditor's Name PO Box 25153 Lehigh Valley, PA 18002 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4196</u> When was the debt incurred? <u>2015</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	\$167.97	\$167.97	\$0.00

Debtor 1 Michelle R Bowers

Case number (if know)

16-24005

2.2	Department of Treasury - IRS Priority Creditor's Name PO BOX 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code	Last 4 digits of account number <u>4196</u> When was the debt incurred? <u>2014, 2015</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	\$13,561.2 1 \$11,360.2 9 \$2,200.92
Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**
☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1	Allegent Community Fcu Nonpriority Creditor's Name 1001 Liberty Ave, Ste #100 Pittsburgh, PA 15222 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2003</u> When was the debt incurred? <u>Opened 03/13 Last Active 7/29/16</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>	Total claim \$3,228.00
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Debtor 1 Michelle R Bowers

Case number (if know)

16-24005

4.2	<u>Bank Of America</u> Nonpriority Creditor's Name Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3761</u> When was the debt incurred? <u>Opened 04/10 Last 7/19/16</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	<u>\$9,113.00</u>
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4.3	<u>Belden Jewelers/Sterling Jewelers, Inc</u> Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1799 Akron, OH 44309 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2675</u> When was the debt incurred? <u>Opened 2/03/13 Last 7/19/16</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Charge Account</u>	<u>\$1,335.00</u>
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4.4	<u>Butler Memorial Hospital</u> Nonpriority Creditor's Name 1 Hospital Way Butler, PA 16003-0071 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? <u>6/2016</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Services</u>	<u>\$125.00</u>
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Debtor 1 Michelle R Bowers

Case number (if know)

16-24005

4.5

Cap1/polrs

Nonpriority Creditor's Name

Capital One Retail Services

Po Box 30285

Salt Lake City, UT 84130

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 5771\$11,953.00When was the debt incurred? Opened 01/15 Last
Active 7/19/16

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Charge Account

4.6

Capital One

Nonpriority Creditor's Name

Po Box 30285

Salt Lake City, UT 84130

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 7466\$13,308.00When was the debt incurred? Opened 01/09 Last
Active 7/18/16

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

4.7

Chase Card Services

Nonpriority Creditor's Name

Attn: Correspondence Dept

Po Box 15298

Wilmington, DE 19850

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 6947\$4,381.00When was the debt incurred? Opened 04/08 Last
Active 7/19/16

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

Debtor 1 Michelle R Bowers

Case number (if know)

16-24005

4.8

Citibank / SearsLast 4 digits of account number 6020\$3,133.00

Nonpriority Creditor's Name
Citicorp Credit
Services/Attn: Centraliz
Po Box 790040
Saint Louis, MO 63179
Number Street City State Zip Code

When was the debt incurred?

Opened 07/15 Last
Active 8/21/16

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Credit Card

4.9

Citibank/The Home DepotLast 4 digits of account number 3980\$3,195.00

Nonpriority Creditor's Name
Citicorp Cr Srvs/Centralized
Bankruptcy
Po Box 790040
S Louis, MO 63129
Number Street City State Zip Code

When was the debt incurred?

Opened 04/10 Last
Active 7/18/16

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Charge Account4.1
0Dept Of Ed/NavientLast 4 digits of account number 1015\$100,405.00

Nonpriority Creditor's Name
Attn: Claims Dept
Po Box 9400
Wilkes Barr, PA 18773
Number Street City State Zip Code

When was the debt incurred?

Opened 10/13 Last
Active 2/17/16

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☒ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Other. SpecifyEducational

Debtor 1 Michelle R Bowers

Case number (if know)

16-240054.1
1Discover FinancialLast 4 digits of account number 0941\$2,515.00

Nonpriority Creditor's Name

Po Box 3025
New Albany, OH 43054

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

When was the debt incurred? Opened 06/05 Last
Active 8/01/16

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Credit Card

4.1
2Kohls/Capital OneLast 4 digits of account number 4786\$760.00

Nonpriority Creditor's Name

Po Box 3120
Milwaukee, WI 53201

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

When was the debt incurred? Opened 10/01 Last
Active 8/02/16

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Charge Account

4.1
3Synco/levin FurnitureLast 4 digits of account number 8942\$2,538.00

Nonpriority Creditor's Name

Po Box 965064
Orlando, FL 32896

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

When was the debt incurred? Opened 03/15 Last
Active 8/02/16

As of the date you file, the claim is: Check all that apply

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Charge Account

Debtor 1 Michelle R Bowers

Case number (if know)

16-240054.1
4Synchrony Bank/LowesLast 4 digits of account number 6134\$1,620.00

Nonpriority Creditor's Name

Po Box 965064
Orlando, FL 32896When was the debt incurred? Opened 03/13 Last
Active 7/19/16

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Contingent☐ Debtor 2 only☐ Unliquidated☐ Debtor 1 and Debtor 2 only☐ Disputed☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify Charge Account4.1
5Synchrony Bank/SamsLast 4 digits of account number 1480\$774.00

Nonpriority Creditor's Name

Po Box 965060
Orlando, FL 32896When was the debt incurred? Opened 12/12 Last
Active 9/05/16

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Contingent☐ Debtor 2 only☐ Unliquidated☐ Debtor 1 and Debtor 2 only☐ Disputed☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify Charge Account**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	\$ <u>13,729.18</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ <u>13,729.18</u>
Total claims from Part 2	6f. Student loans	6f.	\$ <u>100,405.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u>0.00</u>

Debtor 1 Michelle R BowersCase number (if know) 16-24005

6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.

6i. \$ 57,978.00

6j. **Total Nonpriority.** Add lines 6f through 6i.

6j. \$ 158,383.00